

## Behavioral Health Network (BNET)

### ***Policy***

It is the policy of Central Florida Behavioral Health Network, Inc. (CFBHN) to ensure proper operation of the Title XXI Behavioral Health Network (BNET) program for the SunCoast Region.

### ***Purpose***

The purpose of this policy is to provide guidelines for the management of the BNET program.

### ***Procedure***

#### 1. Definitions

- A. Alternative Services: Services outside of the Department of Children and Families' (DCF's) Integrated Data System covered services that are deemed necessary to meet the objectives outlined in a child's treatment plan.
- B. Assessment: The systematic collection and integrated review of individual-specific data, and the completion of evaluations for determining clinical eligibility and treatment planning.
- C. Behavioral Health Network (BNET): A statewide network of Behavioral Health Service providers who serve children with mental health or substance-related disorders who are ineligible for Medicaid and are determined eligible for the Title XXI part of the KidCare Program.
- D. Capitated Rate: The monthly rate set by DCF (per child, per month) that is paid to the Network Service Provider (NSP) regardless of the number of service encounters received by the child. Under capitated rate contracts, the NSP is at-risk and assumes full responsibility for uncertainty in variations of utilization and price/cost/profit/loss when providing services.

#### 2. Managing Entity Responsibilities

- A. The Network Development and Clinical Services (NDCS) Manager, or their designee, is responsible for overseeing the BNET program. These responsibilities include:
  - 1) Ensuring a child is still eligible and enrolled prior to the approval of invoices.
  - 2) Developing and implementing procedures to ensure forms and tracking information are properly completed prior to any final submissions.
  - 3) Completing reviews of BNET forms, including:
    - a. Monthly BNET Alternative Service Forms;
    - b. BNET forms submitted annually by NSPs, as listed in Guidance Document 12.
  - 4) Reviewing and submitting all annual required BNET forms to the Statewide BNET Coordinator. This includes:
    - a. The BNET Regional Provider Employee List; and
    - b. The BNET Statement of Cost, briefly summarizing the revenue and expenditures experienced in the contract year (ending the prior June 30), in which the provider received capitation payment to provide BNET services.
  - 5) Providing technical assistance to NSPs with questions relating to eligibility, enrollment, disenrollment and other topics related to the BNET program.
- B. Compliance Monitoring
  - 1) CFBHN's Continuous Quality Improvement (CQI) team also monitors NSPs that provide BNET services.

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- 2) Monitoring reviews are conducted on an annual basis in accordance with monitoring procedures established at the start of each fiscal year.
3. Responsibilities of the NSPs
  - A. Initial Eligibility Determination and Assessment
    - 1) Children referred to BNET are screened for their clinical eligibility for services. If the screening indicates the child may be eligible, an assessment is conducted.
    - 2) A child is considered eligible for BNET services based on the criteria outlined in 65E-11, F.A.C. and in the latest version of DCF Guidance Document 12.
    - 3) The NSP is responsible for ensuring the “Behavioral Health Network Screening and Eligibility Tracking Form” is properly completed prior to approval.
  - B. Alternative Services
    - 1) As a part of the BNET benefits package, children are eligible to receive services that are not a part of the traditional state-covered services. These services include, but are not limited to:
      - a. Professional consultation
      - b. Medication
      - c. Recreation
      - d. Parent assistance
      - e. Home management
      - f. Respite
      - g. Wraparound services, and
      - h. Other discretionary activities.
    - 2) Alternative services are approved as long as they are identified as part of the child’s individualized treatment plan. The treatment plan is developed from a strengths-based assessment, and alternative services are used to enhance services that enable the child to remain in the community and meet his or her unique needs.
    - 3) Documentation of the approved alternative services shall contain the elements outlined in DCF Template 7.
    - 4) BNET Alternative Services Reports are e-mailed by the NSPs to the BNET liaison at DCF in Tallahassee and uploaded to the CFBHN SharePoint site each month.
  - C. The NSP is responsible for coordination of outreach, enrollments, referrals, screenings, assessments, reverification and disenrollment processing, as outlined in the BNET Guidance Document.
4. Service Continuity for Children Transferring Between Regions/NSPs
  - A. Transfers between Regions/NSPs do not involve CFBHN. For information about this process, the Children’s Medical Services office and BNET Statewide Coordinator must be contacted.
  - B. For service transfers, the BNET Program Manager, or their designee, approves prorated and/or capitated distributions prior to the release of funds.

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- C. CFBHN's BNET Program Manager or their designee, in conjunction with the CFBHN Finance Department, ensures the child is still enrolled based on the final enrollment list that is sent by DCF before approving the invoice.

<p><b>Behavioral Health Network (BNET)</b></p> <p>Approval:  Alan Davidson, President/Chief Executive Officer</p>	<p>Date Issued: <u>07/29/2010</u></p> <p>Last Revision: <u>06/10/2022</u></p> <p>Review Date: <u>03/30/2023</u></p>
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